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APPLICANTS

Edward E. Kelley, Wappingers Falls, NY;

Franco Motika, Hopewell Junction, NY;

** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged	Examiner's Signature _____ Initials _____	NY	4	35	4

ADDRESS

30743
 WHITHAM, CURTIS & CHRISTOFFERSON, P.C.
 11491 SUNSET HILLS ROAD
 SUITE 340
 RESTON, VA
 20190

TITLE

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